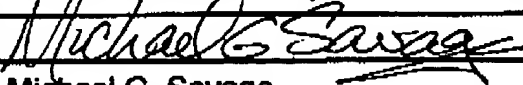



PTO/SB/21 (08-04)
Approved for use through 07/31/2008, OMB 0631-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/822,884	RECEIVED CENTRAL FAX CENTER JAN 17 2005
	Filing Date	03/30/2001	
	First Named Inventor	Jerrald W. Jones	
	Art. Unit	2624	
	Examiner Name	Lucas Divine	
Total Number of Pages in This Submission	8	Attorney Docket Number	0220-028

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.63	<div style="border: 1px solid black; padding: 2px;">Remarks</div> <p style="text-align: center;">By facsimile to 1 703 872 9306</p>	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Potomac Patent Group PLLC, P.O. Box 855, McLean, Virginia 22101-0855	
Signature		
Printed name	Michael G. Savage	
Date	February 17, 2005	Reg. No. 32,596

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Michael G. Savage	Date February 17, 2005

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Patent
Attorney's Docket No. 0220-028

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Jerrald W. Jones et al.

Art Unit 2624

Application No. 09/822,884

Examiner Lucas Divine

Filing Date: 03/30/2001

Confirmation No. 6166

For: Read Only Printer (ROP) Capabilities
on a CSN Platform

AMENDMENT

RECEIVED
CENTRAL FAX CENTER

JAN 17 2005

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed on November 17, 2004, please amend this application as follows.

Amendments to the claims are reflected in the Listing of Claims that begins on page 2 of this paper.

Remarks begin on page 5 of this paper.

BEST AVAILABLE COPY